ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE				
FEE DETERMINATION	24		24/24				
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FORMALITY REVIEW	700		10/02/				
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		71471	11/22				

INDEX OF CLAIMS

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_	(Through numeral) Canceled		Appeal
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If more than 150 claims or 10 actions staple additional sheet here